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ABSTRACT

Current social changes reinforce the need for trained marriage and family counselors. After a brief examination of these changes, the authors suggested paraprofessional training as one alternative for providing needed marriage and family counseling services. Already established paraprofessional programs, advantages, disadvantages, and the criterion for the establishment of a nationwide paraprofessional program are discussed. Areas in which paraprofessionals could make a vital contribution, segments of the nation's population which need paraprofessional counseling, and target groups which might benefit most from paraprofessional training are identified. (Author)

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AN ARGUMENT FOR THE USE OF PARA-PROFESSIONAL COUNSELORS IN PREMARITAL AND MARITAL COUNSELING

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Marriage and family counseling is a specialization focusing on the interpersonal interaction of the marital dyad and the larger family. The establishment of national and regional professional organizations and journals has strengthened this specialized area of counseling. The standards adopted by the American Association of Marriage and Family Counselors (A.A.M.F.C.) and the new licensing laws drafted by several states, moreover, have added credence to the professionalization of marriage and family counselors.

Social changes affecting the family suggest the need for qualified marriage and family counseling. As the population grows, there are numerically more marriages, slightly earlier marriages, as well as an increasing number of divorces (U.S. National Center for Health Statistics, 1972).

Changes in the family include the growing number of working wives, the reduced number of children per family, the greater length of the individual's life span, longer retirement years, and, by implication, longer marriages. While this is not an exhaustive list of the changes affecting the family, these changes point to the growing need for skilled marriage and family therapists.

As the public accepts the role of the therapist, there is less stigma attached to requesting help for troubled marriages and/or troubled families. The problem that exists is that there are not enough fully trained, qualified,

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professional marriage and family counselors available to meet this growing need. Furthermore, there will probably not be enough trained in the future to allow a professional marriage and family counselor for each 200 mile radius within the United States, meaning that the geographical distribution of the available counselors will continue to leave many rural and small town areas without professional services (A.A.M.F.C. Directory, 1974).

In order to supply the need for counseling services for premarital, marital, divorce, and family counseling, a committee within the A.A.M.F.C. suggested in its Spring (1973) Newsletter that a model for para-professional marriage and family counselors be developed. A para-professional counselor would receive technical training in counseling and would counsel under the supervision of a professional. Dr. David Mace, in correspondence, pointed out that the greatest amount of marriage and family counseling in Great Britain, Australia, New Zealand, South Africa, and most continental European countries is performed by para-professional counselors.

This point is further developed by Gerald Sanctuary (1968), who feels there are insufficient numbers of marriage and family counselors, and that the use of para-professionals would be a valid, and reasonable method of resolving this situation. He suggests that most professionals cannot give clients that which they need most: their time and concern. In the British para-professional system, the most important work performed by the para-professionals was simply listening and providing emotional support, not necessarily treating in a therapeutic sense. Sanctuary points out that supervisors working in the British system felt the quality of counseling was of very high standards.

Para-professional marriage and family services were discussed at the Estes Park Annual meeting of the National Council on Family Relations (N.C.F.R., 1971) when Albert Olsen presented the Volunteer Family Counseling Services Project (V.F.C.S.P.) of the Home Advisory and Service Council of New York, Incorporated. This agency advised 454 clients in 1973, and has reported a 1974 average of 60 referrals per month. The focus of the V.F.C.S.P. is an exploration of the intent of court referred clients to become engaged in marital counseling. V.F.C.S.P. para-professionals are trained in a two stage training program: first, six weekly sessions orienting the volunteer counselor to the agency program, and then, a self awareness workshop which meets weekly for ten weeks using the transactional model.

The present authors feel that a para-professional marriage and family counselor should ideally have a more extensive training than required by the V.F.C.S.P.. There should be a minimum of a Bachelor's degree in one of the behavioral/social sciences. Such a degree should qualify the prospective para-professional to be listed as a "Para-professional in Training", with student status, as in the A.A.M.F.C. practice of listing their "Counselor in Training." The specific training for the para-professional marriage and family counselor should include a core of academic courses in personality theory, group dynamics, family sociology, psychological testing, human sexuality, social psychology, and specific, relevant counseling techniques. Such a program of studies could easily be woven into a very respectable master's degree by interdivisional programs designed similarly to the Florida State University's Interdivisional Doctoral Program in Marriage and Family Living with the counseling option.

The second major requirement suggested by Sanctuary (1968), is that there be a careful screening of prospective marriage and family para-professionals. The present authors would hope that either licensing, or certification, require that the para-professional in training complete fifty hours of individual therapy before being allowed to counsel clients.

It is to be understood that a para-professional always works in close association with a fully qualified marriage and family counselor. While the para-professional would conduct therapy sessions, the professional should be available for consultation on current cases. This availability would accomplish two principal things: 1) para-professional counseling could insure quality services to the client, and 2) could provide lower cost services to a larger segment of the population, with greater geographic distribution. An additional advantage of this program is that minority group para-professional could be rapidly trained to serve the special needs of minority groups.

One of the co-authors of the present article has worked as a volunteer para-professional for the past three years. In his experience, he has learned to assist a marriage and family counselor in the administration and scoring of selected psychological and marital tests; he has co-lectured in the area of sex education in high schools and churches; he has participated in group therapy; he has recorded the Adlerian interviews; as a co-counselor, he has led drug therapy groups at the local prison; and he has served on the crisis intervention phone team.

The authors suggest that para-professionals could make a vital contribution in the following areas of marriage and family counseling. In family counseling, they could facilitate sex education, help parents understand the colloquial meanings youth attach to their special sex vocabulary, and aid youth in

understanding their parents, serving as a bridge between generations. The para-professional family counselor might become an important resource for the aged in referral to available public facilities, assisting the doctor in listening to the needs of the aged and relieving much of the loneliness that often accompanies retirement and old age. In marriage counseling, the para-professional could serve in the area of pre-marital counseling, conducting structured workshops similar to the Cana Conferences sponsored by the Roman Catholic Church. These conferences could teach birth control methods, sexual self-understanding, family budgeting, techniques of child rearing and discipline, etc. Supportive counseling to those who have lost a mate through either divorce or death could be another area in which para-professionals could serve. Also, the para-professional could serve vitally as a co-counselor in group therapy, an important and expanding facet of marriage and family counseling. Since a para-professional always functions in association with a professional counselor, he could become a primary source of referral for the professional. The interaction of the para-professional with the supervising therapist will stimulate the practice of a case conference, often unavailable to those in private practice. In this regard, even the clients of the professional counselor may benefit from the development of a para-professional counseling network.

Of the many advantages that this proposal would stimulate are: 1) Counseling could be available to more people than at present, 2) Those involved in para-professional marriage and family counseling could be required to meet minimal state licensing standards, guaranteeing that fewer unqualified persons would be active in marriage and the family counseling, 3) The cost of the counseling per hour could be reduced making services more accessible to a greater

proportion of the population, 4) Minority group members could be trained to meet the needs of minority groups, 5) Enough counselors might be available for court referrals for counseling prior to and/or after the granting of a divorce, and 6) The professional marriage and family counselor would be needed to supervise the para-professional to the clients' best advantage. In the future, a professional counselor might directly serve fewer clients, but at the same time, supervise the work of several para-professionals, thus increasing the total number of people reached who need his services.

The only disadvantage the authors suggest is that many professionals might feel threatened by any para-professional programs. David Mace, an advocate of para-professional programs in this country since 1949, emphasizes this point, and further suggests the resistance of most professionals to give much credence to a para-professional system of marriage and family counseling. But, as professional counselors understand their specialty as counseling with the in-depth problems of clients who need their special training, and that the supervision and consultation with para-professionals would more than compensate for any monetary losses, they will probably support this program.

As the nation becomes more aware of the responsiblity to provide medical and counseling services to all citizens, some national program will emerge to meet the counseling and health needs of our population. Among the programs suggested, the use of para-professionals is sure to be studied. This practice has already demonstrated its worth in many areas of medicine and education. It can be further modified and adopted and meet the pressing needs for marriage and family counseling, and benefit persons facing conflict in family relationships.

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